



ESD – Code 750

Business Case Analysis Report (BCAR)

(Project/Task Name)

Document #: Code750- <projectname>-BCAR-<version #>-<date>

Version: 0.0, MMDDYYYY

Effective Date: MMDDYYYY

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Responsible Office: Enterprise Solutions Division (ESD), Code 750, GSFC



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SIGNATORY AUTHORITY

This Business Case Analysis Report (BCAR) is valid for three (3) years after the last date on the signatures below. At that time, the document content will be reviewed, updated if necessary, and revalidated by the Enterprise Solutions Division (ESD), Code 750 at Goddard Space Flight Center.

Approved by:

Dwaine Kronser / Division Chief
Enterprise Solutions Division, Code 750, GSFC

Date

Approved by: *(Customer signature block)*

Name / Title
Organization or Branch or Division, Code NNN, GSFC

Date

Prepared by:

Tom Perricone / Institutional Team Lead
Enterprise Solutions Division, Code 750, GSFC

Date



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Subject:

Program/Center:

Project/Task Name:

1.0 Introduction

1.1 Issue Statement and Requirements

(Provide a clear and concise statement as to what issue this project/task will address, and identify any Level 1 requirements that are not being met using current systems, services, processes or support)

1.2 Discussion/Background

(Provide any information or data that is relevant to defining current operational status, impacts of a proposed solution to existing systems or services, and/or any other information that could be used to make a well-informed decision on the solution that best meets the needs of Code 750 and its customers)

1.3 Assumptions, Constraints, and Conditions

(Briefly describe important assumptions, constraints, and conditions having major influence on the analysis and its conclusions. The following should be considered as a minimum: the assumed remaining service life of existing systems or services, the required operational date for a proposed solution, the assumed economic service life of any proposed solution, and the operational framework within which any new system, service or support must function)

1.4 Alternatives Analyzed

Option 1: *(Insert title)*

➤ **Pros**

(Provide a numbered list of the known, positive attributes of this option)

➤ **Cons**

(Provide a numbered list of the known, negative aspects of this option)

Option 2: *(Insert title)*

➤ **Pros**

(Provide a numbered list of the known, positive attributes of this option)

➤ **Cons**

(Provide a numbered list of the known, negative aspects of this option)

Option 3: *(Insert title)*

➤ **Pros**

(Provide a numbered list of the known, positive attributes of this option)

➤ **Cons**

(Provide a numbered list of the known, negative aspects of this option)

1.5 Evaluation Criteria



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(Briefly summarize the evaluation criteria used in evaluating each alternative such as assumed lifecycle, cost and benefit ratio, risk/sensitivity analysis, and return on investment)

2.0 Business Case Analysis

2.1 Schedule Analysis

(Provide general assumptions regarding the schedule for each alternative)

Option 1: *(Insert title)*

—

Option 2: *(Insert title)*

—

Option 3: *(Insert title)*

—

2.2 Cost Analysis (\$K and FTE)

(Provide a preliminary cost analysis for each alternative)

Option 1: *(Insert title)*

Description	\$K					FTE				
	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Totals:										

Option 2: *(Insert title)*

Description	\$K					FTE				
	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Totals:										

Option 3: *(Insert title)*

Description	\$K					FTE				
	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015
Totals:										

2.3 Benefits Analysis

(Provide general assumptions regarding the assumed benefits to be realized by Code 750 for each alternative)

Option 1: *(Insert title)*

—

Option 2: *(Insert title)*

—

Option 3: *(Insert title)*

—



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2.4 Risk Analysis

(Summarize the known risks associated with each alternative including the overall risk ratings for each)

Option 1: *(Insert title)*

Risk #	Risk Statement (If/then)	Impact to Selecting this Alternative	Likelihood (1/Low-5/High)	Consequence (1/Low-5/High)

Option 2: *(Insert title)*

Risk #	Risk Statement (If/then)	Impact to Selecting this Alternative	Likelihood (1/Low-5/High)	Consequence (1/Low-5/High)

Option 3: *(Insert title)*

Risk #	Risk Statement (If/then)	Impact to Selecting this Alternative	Likelihood (1/Low-5/High)	Consequence (1/Low-5/High)

2.5 Related Assessments

(Identify any other analysis/assessment activities outside of this BCAR that may influence or impact the selection of any of the alternatives defined in Section 1.4)

2.6 Recommendation

(Identify the recommended alternative and summarize the rationale for the recommendation)

3.0 References

(List documentation or other references used to develop the BCAR (as applicable). Examples include basis of estimates for cost, benefits, and schedule and documentation of related assessments. Each reference should include documentation title, originating organization, and date)



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CONTROL INFORMATION

Originating Group:	<i>(Enter the name of the Org., Division, Branch that initiated this project/task)</i>	Date: MM/YYYY
Author(s):	<i>(Enter the titles of the personnel and name of their Org., Division, Branch that developed the core content for this document)</i>	Date: MM/YYYY
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CHANGE HISTORY LOG

Revision	Effective Date	Description of Changes
Baseline (v1.0)	MM/DD/YYYY	Initial Release